SELF-IDENTIFICATION OF HANDICAP (See instructions and Privacy Act information on page 2.) Last Name, First Name, Middle Initial Birth Date (Mo/Yr) Social Security Number ENTER CODE HERE -**DEFINITION OF A HANDICAP:** A person is handicapped if he or she has a bold numbers 13 through 94). In the case of multiple impairments, choose the code which describes the impairment that would result in the most physical or mental impairment which substantially limits one or more major life activities; has a record of such impairment; or is regarded as having such substantial limitation. impairment. Those handicaps that are to be reported are listed below (codes in PARTIAL PARALYSIS TO THE EMPLOYEE: Self-identification of handicap status is essential for (Because of a brain, nerve, or muscle problem, including palsy and effective data collection and analysis. The information you provide will be cerebral palsy, there is some loss of ability to move or use a part of the used for statistical purposes only and will not in any way affect you body, including legs, arms and/or trunk.) individually. While self-identification is voluntary, your cooperation in providing One hand 67 One side of body, including one accurate information is critical. 62 One arm, any part arm and one leg 63 One leg, any part 64 Both hands 68 Three or more major parts of the Both legs, any part body (arms or legs) I do not wish to identify my handicap status. (Please read the 66 Both arms, any part employee note above and page 2 of this form before using this code.) (Note: Your personnel officer may use this code, if in his or her judgment, you used an incorrect code.) **COMPLETE PARALYSIS** I do not have a handicap. (Because of a brain, nerve, or muscle problem, including palsy and cerebral palsy, there is a complete loss of ability to move or use a part of the body, including legs, arms, and/or trunk.) I have a handicap but it is not listed below. 70 One hand SPEECH IMPAIRMENTS 71 Both hands **76** Lower half of body, including 72 One arm legs 13 Severe speech malfunction or inability to speak; hearing is normal 77 One side of body, including 73 Both arms (Examples: defects of articulation [unclear language sounds]; 74 One leg one arm and one leg stuttering; aphasia [impaired language function]; laryngectomy [removal Both legs 78 Three or more major parts of the "voice box"]) of the body (arms and legs) **HEARING IMPAIRMENTS** OTHER IMPAIRMENTS Heart disease with no restriction or limitation of activity (History of 15 Hard of hearing (Total deafness in one ear or inability to hear ordinary heart problems with complete recovery) conversation, correctable with a hearing aid) Total deafness in both ears, with understandable speech

Total deafness in both ears, and unable to speak clearly

VISION IMPAIRMENTS

- 22 Ability to read ordinary size print with glasses, but with loss of peripheral (side) vision (Restriction of the visual field to the extent that mobility is affected - "Tunnel vision")
- Inability to read ordinary size print, not correctable by glasses (Can read oversized print or use assisting devices such as glass or projector modifier)
- Blind in one eve
- 25 Blind in both eyes (No usable vision, but may have some light perception)

MISSING EXTREMITIES

- One hand
- 28 One arm
- 29 One foot 32
- One leg 33 Both hands or arms
- 34
- Both feet or legs
- One hand or arm and one foot or leg 35
- 36 One hand or arm and both feet or legs 37
- Both hands or arms and one foot or leg
- Both hands or arms and both feet or legs

NONPARALYTIC ORTHOPEDIC IMPAIRMENTS

(Because of chronic pain, stiffness, or weakness in bones or joints, there is some loss of ability to move or use a part or parts of the body)

- One or both hands 44 45 One or both feet
- One or both legs 47 48
- One or both arms 46
- Hip or pelvis 49 Back
- Any combination of two or more parts of the body

- Heart disease with restriction or limitation of activity 81
- Convulsive disorder (e.g., epilepsy)
- Blood diseases (e.g., sickle cell anemia, leukemia, hemophilia)
- Diabetes 84
- Pulmonary or respiratory disorders (e.g., tuberculosis, emphysema,
- Kidney dysfunctioning (e.g., if dialysis [Use of an artificial kidney machine] is required)
- Cancer-a history of cancer with complete recovery 88
- Cancer-undergoing surgical and/or medical treatment 89
- Mental retardation (A chronic and lifelong condition involving a limited ability to learn, to be educated, and to be trained for useful productive employment as certified by a State Vocational Rehabilitation agency under section 213.3102(t) of Schedule A)
- Mental or emotional illness (A history of treatment for mental or emotional problems)
- Severe distortion of limbs and/or spine (e.g., dwarfism, kyphosis [severe distortion of back])
- Disfigurement of face, hands, or feet (e.g., distortion of features on skin, such as those caused by burns, gunshot injuries, and birth defects [gross facial birthmarks, club feet, etc.])
- Learning disability (A disorder in one or more of the processes involved in understanding, perceiving, or using language or concepts, [spoken or written]; e.g., dyslexia)

Standard Form 256 (Rev. 8/87)

U.S. Office of Personnel Management FPM Supplement 298-1 The Rehabilitation Act of 1973 (P.L. 93-112) requires each agency in the Executive branch of the Federal Government to establish definite programs that will facilitate the hiring, placement, and advancement of handicapped individuals. The best means of determining agency progress in this respect is through the production of reports at certain intervals showing such things as the number of handicapped employees hired, promoted, trained, or reassigned over a given time period; the percentage of handicapped employees in the work force and in various grades and occupations; etc. Such reports bring to the attention of agency top management, the Office of Personnel Management (OPM), and the Congress deficiencies within specific agencies or the Federal Government as a whole in the hiring, placement, and advancement of handicapped individuals and, therefore, are the essential first step in improving these conditions and consequently meeting the requirements of the Rehabilitation Act.

The handicap data collected on employees will be used only in the production of reports such as those previously mentioned and not for any purpose that will affect them individually. The only exception to this rule is that the records may be used for selective placement purposes and selecting special populations for mailing of voluntary personnel research surveys. In addition, every precaution will be taken to ensure that the information provided by each employee is kept in the strictest confidence and is known only to the one or two individuals in the agency Personnel Office who obtain and record the information for entry into the agency's and OPM's personnel systems. You should also be aware that participation in the handicap reporting system is entirely voluntary, with the exception of employees appointed under Schedule A, section 213.3102(t) (Mental Retardation); Schedule A, section 213.3102(u) (Severely Physically Handicapped); and Schedule B, section 213.3202(k) (Mentally Restored). These employees will be requested to identify their handicap status and if they decline to do so, their correct handicap code will be obtained from medical documentation used to support their appointment. No other employees will be required to identify their handicap status if they feel for any reason it is not in their best interest to have this information officially recorded outside of medical records. We request only that anyone not wishing to have this information entered in the agency's and OPM's personnel systems indicate this to their Personnel Office, rather than intentionally miscoding themselves, since false responses will seriously damage the statistical value of the reporting system.

[In those instances where the employee is or was hired under Schedule A, section 213.3102(t) (Mental Retardation), the Personnel Director or his/her designee (a Vocational Rehabilitation Counselor may also be helpful) will assist the individual in completing this form and ensure that the employee fully understands the meaning of the form and the options available to him/her as noted above.]

Employees will be given every opportunity to ensure that the handicap code carried in their agency's and OPM's personnel systems is accurate and is kept current. They may exercise this opportunity by asking their Personnel Officer to see a printout of the code and definition from their record, by notifying Personnel any time their handicap status changes, and by initiating action in either of these cases to have the necessary changes made to their records. The code carried on employees in their agency's system will be identical to that carried in OPM's system, and any change to the agency records will result in the same change being made to OPM's records.

Your cooperation and assistance in establishing and maintaining an accurate and up-to-date handicap report system is sincerely appreciated.

PRIVACY ACT STATEMENT

Collection of the requested information is authorized by the Rehabilitation Act of 1973 (P.L. 93-112). The information you furnish will be used for the purpose of producing statistical reports to show agency progress in hiring, placement, and advancement of handicapped individuals and to locate individuals for voluntary participation in surveys. The reports will be used to inform agency top management, the Office of Personnel Management (OPM), the Congress, and the public of the status of programs for employment of the handicapped. All such reports will be in the form of aggregate totals and will not identify you in any way as an individual.

Solicitation of your Social Security Number (SSN) is authorized by Executive Order 9397, which requires agencies to use the SSN as the means for identifying individuals in personnel information systems. Your SSN will only be used to ensure that your correct handicap code is recorded along with the other employee information that your agency and OPM maintain on you. Furnishing your SSN or any other of the requested data for this collection effort is voluntary and failure to do so will have no effect on you. It should be noted, however, that where individuals decline to furnish their SSN, the SSN will be obtained from other records in order to ensure accurate and complete data.

Employees appointed under Schedule A, section 213.3102(t) (Mental Retardation), Schedule A, section 213.3102(u), (Severely Physically Handicapped), or Schedule B, section 213.3202(k) (Mentally Restored) are requested to furnish an accurate handicap code, but failure to do so will have no effect on them. Where employees hired under one of these appointments fail to disclose their handicap, however, the appropriate code will be determined from the employee's existing records or medical documentation submitted to justify the appointment.